STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

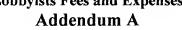
I. Name of Lobbyist(s) Jenn Myers					
II. Name of lobbyist's partnership, firm or corporation, if any:					
The Protessional Fire Egntes of (Name of partnership, firm or corporation)	New Hampshire	2			
43 Centre J. Concord, NH Business Address: (Street) (Town/City)	03301	(7: 0.1)			
(1013) 223-3304 (1013 223-3310	(State) e-mail <u>\env\v\p</u> f	(Zip Code)			
(Telephone) (Fax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client:					
The Professional Fire Fighten of New Hampshire (Full Name of Client as it appears on the Lobbyist Registration Form) OR					
\Box All reportable transactions by the lobbyist (including the lobbyist unrelated to any particular client.	s family), or the lobbying firm l	isted below which are			
IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18 act	July 25, 2018				
October 31, 2018	January 30, 2019 tivity from 10/1/18 to 12/31/18				
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.					
VI. Check if additional reports are attached:					
If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses					
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement					
☐ If you, your firm, or your family has made political contributions	, you must file Addendum C-I	Political Contributions			
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.					
(Signature of lobbyist)	4 20 20 (Date)	RECEIVED			
knn Muers					
(Pfint Name of lobbyist)		APR 25 2018			

NEW HAMPSHIRE DEPARTMENT OF STATE

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Fighters of New H	ampshire
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services fee amount reported shall not
a) Total of all fees received in this reporting period	a) \$ [99. 20
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$
c) Total of all fees received to date (Add lines a and b)	c) \$ 199.70
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made may be filed for the lobbyist(s)/fir e aggregate total of all expenses particles, (b) the aggregate total of e: meals purchased during a busine ses than \$10 that is given to the person d with a value of \$25.00 or less); a parting period of greater than \$25.00 are of greater than \$25, purchase of the trian \$25, but not greater than \$25, person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, but not greater than \$25, purchase of the person ser than \$25, but not greater than \$25, but not
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ Ø

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$Ø
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)\$
f) Total of all expenses year to date	f) \$ Ø
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
•	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	in that the foregoing information
(Signature of lobbyist)	4 21 1018 (Date)
(Print Name of kobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying par	tnership, firm, or corpo	ration: The Profession	al Fre Fighers of NH		
			corporation and not related to any		
particular client):					
Date of Report (check one):					
April 25, 2018 ₩	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □		
			nd Expenses described above, and umber of Addendum forms being		
	3).				
Addendum B(s	3).				
Addendum C(s	s).				
I hereby swear or affir complete to the best of			nt and each Addendum is true and		
(Signature of lobbyist)	yor	<u>4</u>	20 \ 2018 (Date)		
LAN MUER (Print Name of lobbyis	<i>/</i>)				